

City of Annapolis Board of Supervisors of Elections 160 Duke of Gloucester Street Annapolis, MD 21401-2517



Elections@annapolis.gov • 410-263-7929 • Fax 410-280-1853 • TDD use MD Relay or 711 • <u>www.annapolis.gov</u>

The Board of Supervisors of Elections reserves the right to modify all 2021 City of Annapolis' Municipal Election forms and information as needed to address and comply with the precautions due to the COVID-19 Pandemic.

Campaign Fund Report Analysis Correction Form

Campaign Finance Entity Name **Brooks for Annapolis**Date Sent to Campaign: **10/5/2021**Due Date of Report Being Amended **11/4/2021**Transaction period from **8/23/2021 to 9/12/2021**

			Initial
Forms to be amended	Page #	Description of what needs to be changed	Complete
Summary Sheet	1	Page numbering is incorrect due to added spreadsheets not numbered;	
		Item #5 Disbursements from Schedule 3: Column 4 should be \$604.38;	
		Item #5 Disbursements from Schedule 3: Column 6 should be \$250.00 (transfer to Finlayson campaign). Please confirm	
		the 8/23 date of this transfer – Finlayson Campaign reports receipt of this transfer on 8/22, which is in a prior reporting period;	
Schedule 1	2-3	Page numbering is incorrect – see Summary Sheet;	
	:	Missing Name of Candidate, Report Period, and Page number on spreadsheet page;	
Schedule 2	4	Page numbering is incorrect – see Summary Sheet;	
		Strike through and initial "N/A" page	
Schedule 3	5-6	Page numbering is incorrect – see Summary Sheet;	
		Missing Name of Candidate, Report Period, and Page number on spreadsheet page;	·
Schedule 4	7	Page numbering is incorrect – see Summary Sheet;	
		Strike through and initial "N/A" page	
Schedule 5	8	Page numbering is incorrect – see Summary Sheet;	
		Strike through and initial "N/A" page	

Signature of Theasurer (required for all entities)

Signature of Candidate (required for all entities, except committees)

Date

Page	1	of	S
. 490		_ ~.	



City of Annylis

Board of Supervisors of Elections 160 Duke of Gloucester Street Annapolis, MD 21401-2517

Elections@annapolis.gov • 410-263-7929 • Fax 410-280-1853 • TDD use MD Relay or 711 • www.annapolis.gov

Campaign Fund Report Summary of Receipts and Disbursements

	Summary of Necerpts and D	1300130111011163		
Brooks Schandel	meier, Brooks for Annapolis	Alderperson		5
Name of candidate, f	und or committee as filed with the election office	Office		Ward
Bank information	<u>Bank name</u>	Aco	count number	
1. Checking		On file with Elections	s Office	/ 1
2. Other		On file with Elections	Office	
		On file with Elections	Office	
Transaction period fr	om: 8/23/21 to	9/12/2		
Due no later than	4:30PM on the dates specified in the Candidate	Handbook	~~	
Final Report (Che	ck if you intend to close the account.) Surplus fun	ds distributed to (<u>4.44</u>	.040):	
✓ Amended Report (Check if this is a filing of an amended report for t	he above transaction	period.)	
Summary of Receip	ts and Disbursements			
1. Cash balance -	beginning of transaction period	\$	24,707.59	·
2. Receipts from S	chedule 1, column 4		\$275.00	
3. Proceeds from 5	Schedule 2, column 4			
4. Total cash availa	able (Add lines 1, 2 and 3)	\$)}4¦(&5°i
5. Disbursements	from Schedule 3:	,		
Column 4	\$ 604.38			
Column 5				
Column 6	•	•		
6. Total disbursem	ents	\$	604.38	
7. Cash balance -	end of transaction period (Subtract line 6 from line	e 4)	\$24,378.21	
8. Total outstandin	g obligations from Schedule 4	\$, ,	
9. In-kind contribut	ions from Schedule 5, column 4	\$		
and to the best of my	jury, I declare that I have examined this report, the knowledge and belief it is true, correct and compormittee, treasurer and chair must sign report.)	including accompanyi plete. (If report of cand	ng schedules and si lidate, candidate and	tatements, I treasurer
Candidate	2 Jun	Dat	e 11/9/2	<u> </u>
Treasurer	ge 57-	Dat	• <u> 11/9/2</u>	
Chair of Committee o	or Slate	Dat	e	

	7		8
Page	<i>U</i>	of	



City of Amapolis

Board of Supervisors of Elections 160 Duke of Gloucester Street Annapolis, MD 21401-2517

Elections@annapolis.gov • 410-263-7929 • Fax 410-280-1853 • TDD use MD Relay or 711 • www.annapolis.gov

Name of candic	date, fund or committee Brooks fo	or Annap	oolis	00/12/21	
Report period -	transactions from 08/23/21	0 43		to 09/12/21	
			butions and ns and In-kind C	•	
Date received	Complete name and residence address of Payer**			ee instructions for code.	Amount
	See attached spreadsheet	Code *	Ticket price	Cash	
				Check #	
		* T, enter	price per ticket	EFT	
	"Other" Description:			Rcpt#	
	AGGREGATE AMOUNT RECEIV	/ED FROM	M PAYER TO DA	ATE\$	
		Code *	Ticket price	Cash	
				Check #	
		* T, enter	price per ticket	EFT	***************************************
	"Other" Description:		Rcpt#		
	AGGREGATE AMOUNT RECEIV	/ED FROI	M PAYER TO DA	ATE\$	
		Code *	Ticket price	Cash	
				Check#	
		* T, enter	price per ticket	EFT	
	"Other" Description:				
	AGGREGATE AMOUNT RECEIV	/ED FROM	ATE\$	1	
		Code *	Ticket price	Cash	
				Check#	
		* T, enter	price per ticket	EFT	
	"Other" Description:			Rcpt #	
	AGGREGATE AMOUNT RECEIV	/ED FROI	M PAYER TO DA	ATE\$]
		Code *	Ticket price	Cash	
				Check #	
		* T, enter	price per ticket	EFT ,	
	"Other" Description:			Rcpt #	
	AGGREGATE AMOUNT RECEIV	/ED FROI	M PAYER TO DA	ATE\$	
				Total this page \$	

^{**}Note – In order to receive contributions from a Political Action Committee (PAC), the PAC must be registered as certified/qualified and active with the Maryland State Board of Elections. If a PAC directly or indirectly, expends \$51.00 or more to aid or oppose the nomination or election of a candidate, the PAC shall report a statement of contributions and expenditures to the candidate's treasurer and said statement shall be included in this report. This provision applies to any PAC located outside of the City with respect to any expenditures of funds within the City.

Date Received Name	lame	Address1	Address2	City	State		Zip Code Check #	Receipt #	Amount Aggrigate	ggrigate
8/25/2021 John Pica	ohn Pica	14 State Circle		Annapolis	MD	21401 C	Credit Card	CC0825211	\$100	\$100
8/26/2021 E	8/26/2021 Debbie Driscoll	1393 Stonecreek Rd		Annapolis	MD	21403 C	Credit Card	CC0826211	\$50	\$50
9/5/2021 Laura Day	aura Day	7739 Acrocomia Dr		Hanover	MD	MD 21076 C	Credit Card	CC0905211	\$100	\$100
9/5/2021 C	3/5/2021 Christine Kamenoff	117 Edelmar Dr		Annapolis	MD	MD 21403 C	Credit Card	CC0905212	\$25	\$25



Gity of Annaple

Board of Supervisors of Elections
160 Duke of Gloucester Street
Annapolis, MD 21401-2517

		A 21	
ne of candi	date, fund or committee Brooks for	r Annapolis	/
ort period	- transactions from 08/23/21	to <u>09/12/21</u>	
	Schedule	e 2 - Loans and Transfers	
Date eceived	Complete name and residence address of lender or transferor	Description of loan or transfer	Amount
	N/A		
		Aggregate amount of loan or transfer \$	
		Loan Consent Form filed herewith yes no	
		Aggregate amount of loan or transfer	
		Loan Consent Form filed herewith yes no	
		Aggregate amount of loan or transfer \$	
		Loan Consent Form filed herewith yes no	
		Aggregate amount of Joan or transfer \$	
	/	Loan Consent Form filed herewith yes no	
		Aggregate amount of loan or transfer \$	
		Loan Consent Form filed herewith yes no	
		Aggregate amount of loan or transfer \$	
		Loan Consent Form filed herewith yes no	
		Aggregate amount of loan or transfer \$	
		Loan Consent Form filed herewith yes no	
		Aggregate amount of loan or transfer \$	
		Loan Consent Form filed herewith yes no	



City of Amapilia

Board of Supervisors of Elections 160 Duke of Gloucester Street Annapolis, MD 21401-2517

Elections@annapolis.gov • 410-263-7929 • Fax 410-280-1853 • TDD use MD Relay or 711 • www.annapolis.gov

Name of candidate, fund or committee Brooks for Annapolis	An Annual Market Annual Market Market (Market Market) (Market Market) (Market Market) (Market Market) (Market)
Report period - transactions from 08/23/21	to 09/12/21
	Schodule 3 . Dishursements

	inds (candidate	Amount																				
9	Transfers to other funds (candidate or committee name required)	Name																				-
5	Loan	Amount																				
4	All payments other than loan payments and transfers to other finds	Amount																				
	All paym loan pi	Code			•					-												
3	Pavment Method					escription:				escription:				escription:				escription:				scription:
	лөшлед		Check #	Cash		er".	Check #	Cash	EFT	"Other" Des	Check #	Cash	EFT	"Other" De	Check #	Cash	EFT	"Other" De	Check #	Cash	ЕН	"Other" Description:
2	Pavee and Address																					
1	Date														\$							

Totals this page \$

Date	Payee	Payee Address	Code	Amount	Amount Method Check # Cash	ck # Cash		Receipt # Description	
08/26/21	38/26/21 ActBlue	366 Summer St, Somerville, MA 02144	0	\$7.00 Debit	Debit			Credit Card Processing	
08/31/21 BB&T	BB&T	101 Hillsmere Dr, Annapolis, MD 21403	0	\$7.61 Debit	Debit			Bank fees	
08/31/21	38/31/21 Tidemore	516 N. Charles St., Suite 212, Baitimore, MD 21201	Pl.	\$579.66	\$579.66 Check #113			Walk piece design & print	
09/03/21	09/03/21 Google	1600 Amphitheatre Parkway Mountain View, CA 94043 O	0	\$6.36 Debit	Debit	-		Domain purchase	:
09/03/21	39/03/21 ActBlue	366 Summer St, Somerville, MA 02144	0	\$3.75 Debit	Debit		**************************************	Credit Card Processing	

	$\overline{}$		4
Page		of	V



City of AnnapoleBoard of Supervisors of Elections 160 Duke of Gloucester Street Annapolis, MD 21401-2517

Elections@annapolis.gov • 410-263-7929 • Fax 410-280-1853 • TDD use MD Relay or 711 • www.annapolis.gov

<u> </u>	
Name of candidate, fund or committee Brooks for Annap	olis
Report period - transactions from 08/23/21	to 09/12/21
	ations as of End of Report Period

1	2	3	4
Name and address	Description of debt (Loans, unpaid bills, etc.)	Date debt incurred	Amount
N/A			

Total this page	\$

	0		4	
Page	0	of _	U	



City of Annaplis Board of Supervisors of Elections 160 Duke of Gloucester Street

Annapolis, MD 21401-2517

Elections@annapolis.gov • 410-263-7929 • Fax 410-280-1853 • TDD use MD Relay or 711 • www.annapolis.gov

Name of candidate, fund or comm	ittee Brooks for A	nnapolis		
Report period - transactions from			to 09/12/21	
		To the A A and the	(1	

Schedule 5 - In-kind Contributions

1	2	3	4
Date	Name and address of contributor	Description of In-kind Contribution	Fair Market Value (during this report period)
	N/A		

Total this page	\$